PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/5/039

1				CITIDOI -	U, 201				1/6	115,	1039/	
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							MALL EN	ITITY	·		R THAN
U.E	. NATIONAL	STAGE FEĖS	(Colum	וח ו)	T	(Column 2)				OR	SMALL	ENTITY
-	SIC FEE		SMALL ENT. = \$ 150				 ┨┞	RATE	FEE	」	RATE	FEE
			Satisfies POT A		LÀRGE ENT. = \$ 800 All other situations =		ВА	SIC FEE		OR	BASIC FEE	1110
EXAMINATION FEE			. (4) = \$50/\$100 U.S. Is ISA = \$50/\$100		1 1	\$ 100 / \$ 200		AM. FEE		Ì	EXAM. FEE	
SEARCH FEE			ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		SE	ARCH FEE		1	SEARCH FEE	
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 ÷	>	\$ 125 =		1	X \$ 250 =	
101	'AL CHARGEA	BLE CLAIMS	23 minus 20 =		. 3		;	< \$ 25 =		OR	X \$ 50 =	
ND	EPENDENT CL	AIMS	2 m	ninus 3 =	*		X	\$ 100 =	 	OR	·	
MUL	TIPLE DEPEN	DENT CLAIM PR	SENT				l	\$ 180 =	 	-	X \$ 200 =	<u> </u>
• If	the difference	in column 1 is	less than zero	o, enter "C)" in cc	olumn 2	!	TOTAL		OR	+\$360 =	
	•				10176	<u> </u>	OR.	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	:NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total .	* .	Minus	**		=	×	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	×	\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	\$ 180 =		OR	+ \$ 360 =	
•						·.	101	AL ADDIT. FEE		OR	TOTAL ADDIT. FEE	.,
		(Column 1)		(Colun	nn 2)	(Column 3)						
AMENDMENTB		CLAIMS REMAINING · AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		Ė	×	\$ 26 =		OR	X \$ 50 ≈	
	Independent		Minus	***	,	5	×	\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ :	180 =		OR	+ \$ 360 =	
		:				······································		AL ADDIT. FEE	,	L	TOTAL ADDIT.	
						·		ree E			FEE [
***	if the "Highest Nu	mn 1 is less than th mber Previously Pai mber Previously Pai nber Previously Paid	ld For" IN THIS SP ld For" IN THIS SP	ACE is less	than '20'	', enter "20".	In the app	ropriate box	in column 1.			

FORM PTO-875 (Rev: 02/2005)